

2013 NOV -5 PM 12:31 Application for Zoning Relief

RECEIVED
TOWN CLERK
TOPSFIELD, MA

Form A

Before you file this application, it is necessary that you be familiar with the requirements for filing plans and other materials in support of this application as specified in the Topsfield Zoning Bylaws and the Topsfield Zoning Board of Appeals Rules and Procedures that are available from the Town Clerk.

Incomplete applications will not be considered unless waivers are previously obtained from the Zoning Board of Appeals

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BOARD USE ONLY

Date Filed:

Date Action Due

Public Hearing:

Decision:

Revised Form Date: 04/26/2011

NATURE OF APPLICATION:

- ☒ Petition for Special Permit pursuant to Article III, Section 2.17 of the Zoning Bylaw.
- ☐ Petition for Finding pursuant to Article , Section of the Bylaw.
- ☐ Petition for a Variance from Article , Section , of the Zoning Bylaw.
- ☒ Petition for Site Plan Review pursuant to Article IX of the Zoning Bylaw (and the Guidelines and Performance Standards for Activities Subject to the Provisions of Article IX of the Topsfield Zoning Bylaw; and Supplement Form C for submitted requirements and formats).
- ☐ Petition for a Comprehensive Permit pursuant to G.L.c. 40B, Section 20-23.
- ☐ Appeal from the decision dated of the Building Inspector or others pursuant to L.L. c. 40A, Section 15.

DESCRIPTION OF APPLICANT:

- a. Name Syllogistic Management Solution, LLC
- b. Address C/O Alan L. Grenier 49 Main St. Topsfield, MA 01983
- c. Phone Number (978) 777-7000
- d. Interest in Premises (e.g., owner, tenant, prospective purchaser, etc.) Prospective Purchaser
(Attach copy of lease and/or letter of authorization from owner, if applicable)

DESCRIPTION OF PREMISES:

- a. Assessor's Map 69, Lot(s) 13, Zoning District ORA
- b. Location of Premises (number and street) 116 Boston Street
- c. Name and address of legal owner (if different from Applicant) Kerry Cheever, Trustee
- d. Deed to the Premises recorded at (if known):
☒ Essex South District Registry of Deeds, Book 26302 Page 443
☐ Essex South Registry District of the Land Court, Certificate Number
- e. Prior zoning decisions affecting the Premises (if any):
Date of Decision Name of Applicant
Nature of Decision
- f. Present use of the Premises Residential, Horse Farm
- g. Present structures conform to current Zoning Bylaw. ☒ Yes ☐ No. If no, in what respect does it not conform.

PROPOSAL (attach additional sheets if necessary):

- a. General Description: See Schedule Attached

- b. If proposal is for construction or alteration of an existing structure, please state: None

	FRONT	REAR	SIDE(S)
1. Setbacks required per bylaw	_____	_____	_____
2. Existing setbacks	_____	_____	_____
3. Setbacks proposed	_____	_____	_____

	FRONTAGE	AREA
4. Frontage and area required by bylaw	_____	_____
5. Existing frontage (s) and area	_____	_____
6. Frontage (s) and area proposed	_____	_____

	FEET	STORIES
7. Existing Height	_____	_____
8. Height proposed	_____	_____

- c. Other town, state or federal permits or licenses required, if any: None

NECESSARY ACCOMPANYING DATA:

It is required that every application be accompanied by appropriate supporting data. Failure to submit appropriate and complete data could result in delay and/or denial of application for zoning relief. Place a check next to the applicable accompanying supporting data:

Variance of Special Permit Applications:

(See Zoning Board of Appeals Rules and Procedures Section III)

All required supporting data attached ☒ Yes ☐ No

Site Plan Review Applications:

(See Town of Topsfield Zoning Bylaw, Article IX, Section 9.05. See also Guidelines and Performance Standards for Activities Subject to the Provisions of Article IX of the Topsfield Zoning Bylaw)

All required supporting data attached ☒ Yes ☐ No

Comprehensive Permit Applications:

(See G.L.c. 40B, Sections 20-23)

All required supporting data attached ☐ Yes ☐ No

Appeals from decisions of Building Inspector or Others:

(See Zoning Board of Appeals Rules and Procedures, Section III (1) (e))

All required supporting data attached ☐ Yes ☐ No

If all required supporting data is not attached, why not:

11.5.13
 Date

Alan L. Tremi
 Signature of Applicant

SCHEDULE TO SPECIAL PERMIT APPLICATION

SYLLOGISTIC MANAGEMENT SOLUTIONS, LLC

The Applicant is seeking a Special Permit for a Conference and Event Facility under Article III, Section 2.17 of the Topsfield Zoning Bylaw. The present use as a residence and horse farm would be enhanced by the introduction of the subject conference center. There will be no changes to the exterior of the physical structures, and the only change to the site will be an additional parking lot, (see Site Plan). Sylogistic Management would use the facility in its ongoing training seminar business, to include, the creation of training guides, scheduling, event coordination, assisting trainers during their sessions, and taking follow up calls from trainees. The new facility will expand the training options by conducting web based and on location training to include retreat styled training sessions.

The facility will enhance and be of benefit to the surrounding community by providing a resource to satisfy the requirements of such a training facility in Topsfield. As the subject site is located a considerable distance from Boston Street, there will no impact on traffic and congestion nor otherwise impair pedestrian traffic. Finally, the facility through its training seminars will have no impact on the public water, drainage or sewer system, and as there are no proposed changes to the exterior of the building, the integrity and character of the district will be maintained.

**TOWN OF TOPSFIELD, MA
ZONING BOARD OF APPEALS**

Application Supplement Form B

Attach to this form a copy of the Assessor's map (scale 1" equals 200') showing the property and all other properties and roadways within 300 feet of any portion of the property. Also, show the lot number and lot owner's name on each lot within the 300'.

List below the lot owner names and mailing addresses as shown in the Assessors' records, beginning with the property of the Applicant (locus).

Applicant's Name, Mailing Address: Alan Grenier

Telephone No. 978. 777. 7000

Locus: 116 Boston. 69-13

Map	Block	Location	Owner	(If different from location) Mailing Address
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SEE ATTACHED LIST

If needed, attach additional sheets.

Assessor's Certification

To the Topsfield Zoning Board of Appeals:

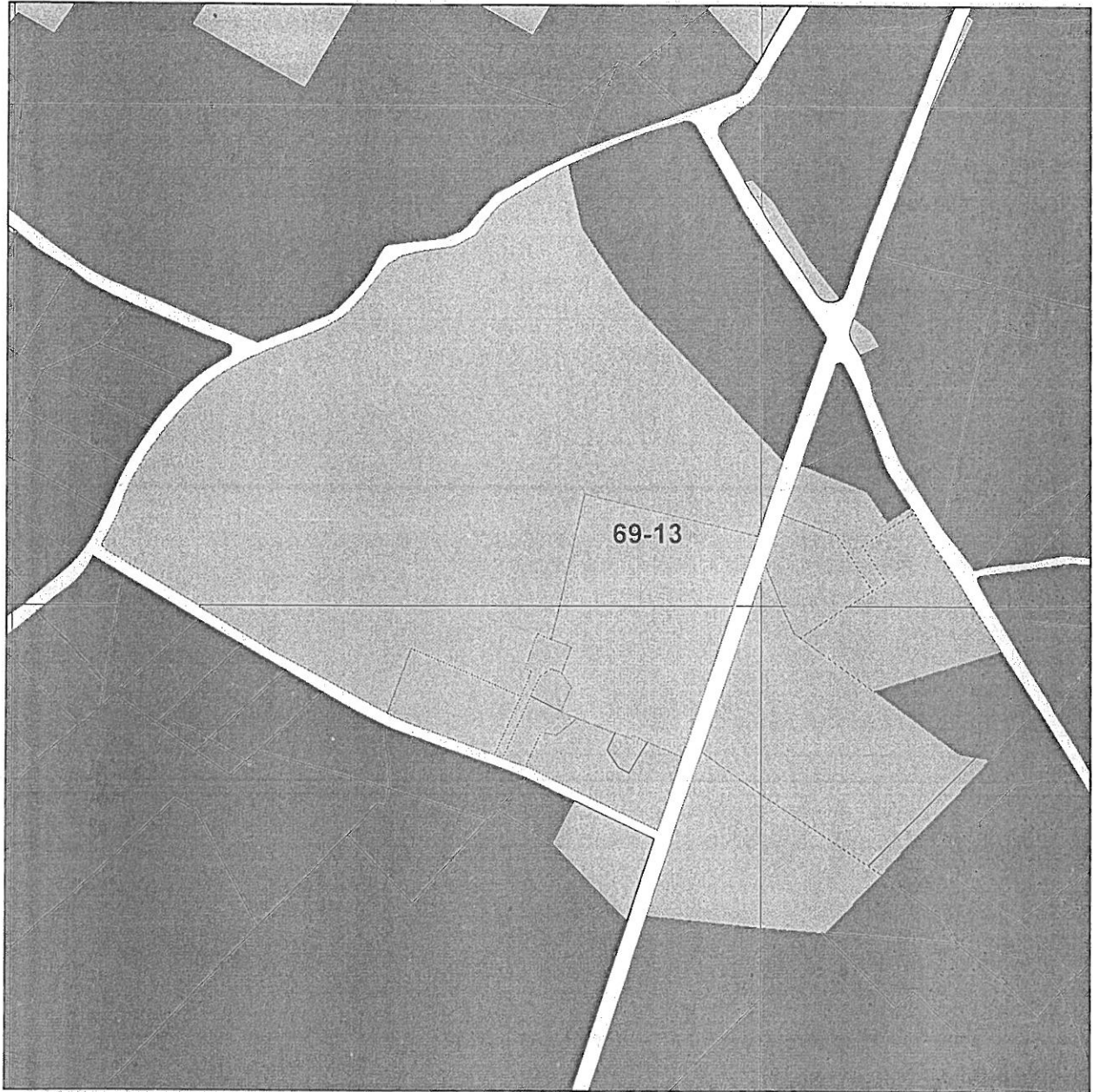
This is to certify that, at the time of the last assessment for taxation made by the Town of Topsfield, the names and mailing addresses of the parties assessed as owners of land within 300' of the parcel of land shown in the attached sketch were as listed.

Authorized Signature
Assessors' Office

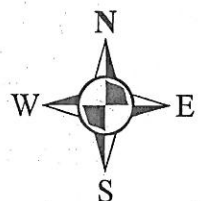
Kurtis [Signature] asst. to principal Assessor

Date of Verification 10/31/13

69-13 116 BOSTON ST.



GEOGRAPHIC INFORMATION SYSTEM
VISION APPRAISAL TECHNOLOGY



ABUTTERS LIST FOR ZONING BOARD 69-13 116 BOSTON ST WITHIN 300'
TOPSFIELD, MA

Map	Block	Lot	Lot	Cut	Location	OWNERS NAME	CO OWNERS	Mailing Address	City	St	Zip
63	3				130 BOSTON ST	DIGRAZIA ERIC		45 SALEM RD	TOPSFIELD	MA	01983
64	1				79 SALEM RD	CARROLL THOMAS R	CARROLL NANCY E	79 SALEM RD	TOPSFIELD	MA	01983
64	2				75 SALEM RD	CICCARELLI MARK	LEARY SUZANNE	75 SALEM RD	TOPSFIELD	MA	01983
64	5				125 BOSTON ST	DOORLY MARYJANE		PO BOX 245	TOPSFIELD	MA	01983
69	9				23 GARDEN ST	ESSEX COUNTY GREENBELT	ASSOCIATION INC	82 EASTERN AVE	ESSEX	MA	01929
69	10				13 GARDEN ST	TOWN OF TOPSFIELD	WATER DEPT TOWER	8 WEST COMMON ST	TOPSFIELD	MA	01983
69	11				11 GARDEN ST	PATRICIA A BRICKETT FAM IRV TR	BRICKETT PATRICIA A/	BRICKETT ELIOT 11 GARDEN ST	TOPSFIELD	MA	01983
69	12				9 GARDEN ST	PEIRCE JAMIE M	PEIRCE MELISSA T	9 GARDEN ST	TOPSFIELD	MA	01983
69	13				116 BOSTON ST	CHEEVER KERRY TR	CHEEVER REALTY TR	116 BOSTON ST	TOPSFIELD	MA	01983
69	14				111 BOSTON ST	RICHARDSON GREEN INC		2 CENTRAL ST	MIDDLETON	MA	01949
69	15				97 BOSTON ST	RICHARDSON GREEN INC		2 CENTRAL ST	MIDDLETON	MA	01949